2000 UNIFORM BUSINESS REPORT (UBŔ) DOCUMENT # **P99000024008** Aug 09, 2000 8:00 am Secretary of State 1. Entity Name CAPITOL COMPUTER RESOURCES CORP. 08-09-2000 90076 017 ***150.00 Mailing Address Principal Place of Business 937 S.W. 113TH TERRACE 937 S.W. 113TH TERRACE PEMBROKE PINES FL 33075 PEMBROKE PINES FL 33075 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number, Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SEAYS, JOSEPH C Street Address (P.O. Box Number is Not Acceptable) 937 S.W. 113TH TERRACE PEMBROKE PINES FL 33075 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition D TITE F TITLE ☐ Delete SEAYS, JOSEPH C JR NAME NAME STREET ADDRESS 937 S.W. 113TH TERRACE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PEMBROKE PINES FL 33075 Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/28/00

951-699.9013

Daytime Phone #

9 Hachmens # 99 000024008

July 28, 2000

Florida Depatment of State Division of Corportations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl 32302-1500

Dear Sir or Madam:

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SUBJECT: BUSINESS REPORT FILING

Upon checnking my mail a few days ago I received a letter from your department instructing me to file the standard Uniform Business Report for my business. What alarmed me was the fact that it indicated that I did not respond to a previous notice. This is the first year of incorporation for my company I have never received anything from any of the state business departments until now. I called and spoke with your receptionist about the first letter and she was of no help except to tell me that the fee was originally \$150.00. I have enclosed a check for \$150.00 (First Notice Filing Fee) as payment for my corporation, due to the fact that I did not receive the first notice. I hope this is satisfactory with you.

Respectfully,

Joseph-C. Seays